NONCITIZEN STUDENT APPLICATION FOR ROTC TRAINING (AR 145-350)			DATE
LAST NAME - FIRST NAME - MIDDLE NAME (without abbreviations)			AGE
PLACE OF BIRTH (City or Town, County, District, Province or State and Country)			DATE OF BIRTH (Month-Day-Year)
IT IS MY INTENTION TO BECOME A CITIZEN OF THE UNITED STATES.			
THE STATEMENTS I HAVE MADE AND THE INTENTION I HAVE EXPRESSED IN THIS AFFIDAVIT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.			
(Full and true signature of student)			
WITNESSED BY			
DATE	TYPED NAME OF PMS OR ASST PMS	SIGNATURE	

DA FORM 1624-R, 1 AUG 61

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

USAPA V1.00